

This communication should be viewed by:

Primary Care Providers
Behavioral Health Providers
Clinical staff
Specialists

Annual Review of Clinical Criteria

InterQual® criteria, published by Change Healthcare, are used in many of the MVP Health Care® (MVP) medical review processes to evaluate medical necessity of health care services. Annual changes to the criteria are published for health care practitioners to review prior to implementation. MVP has posted a copy of the InterQual criteria changes on our website. To review, sign in at mvphealthcare.com/providers, then select *Medical Policies* under *Resources*. Select the *InterQual 2024 Clinical Revisions* at the bottom of the page to view changes.

The criteria will be available for Participating Providers to review and comment for 15 days from the date of this notice. If you have questions about these changes, you may speak with an MVP Medical Director by calling the MVP Customer Care Center for Provider Services at **1-800-684-9286**. The effective date of the criteria change will be communicated in a subsequent FastFax following the comment period.

It's Time to Recertify Your Patients!*

The Families First Coronavirus Response Act has expired. To learn how MVP can help your patients continue their coverage, visit mvphealthcare.com/recertification.

*Applies to Members enrolled in Medicaid, Child Health Plus (CHP), Health and Recovery Plan (HARP), and the Essential Plan (EP).

Contact MVP with questions:



Contact your MVP Professional Relations Representative.



Call the MVP Customer Care Center for Provider Services at **1-800-684-9286**



Chat with us! Visit mvphealthcare.com/Providers and click the **Live Chat** red circle on the bottom right.

To view all communications, visit mvphealthcare.com/FastFax